

	BOOTH APPLICATION City of Biggs “American Hometown” Celebration Tuesday, July 4th 2006 “A Family Fun Event”	Date _____ Check # _____ <u>Assigned Location:</u> _____ Power Yes/No _____ Food Booth Yes/No _____ <small>*This Section for Committee Use Only</small>
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EVENT: ALL-DAY EVENT Pancakes at 7:00 AM, All Day Activities to Fireworks “Drug and Alcohol Free Zone”

DATE: July 4, 2006

LOCATION: City of Biggs, Cork Oak Park (Corner of 1st and C street next to the swimming pool). At Biggs High School/Elementary School Grounds.

SPONSORED BY: City of Biggs American Hometown Celebration Committee

Mailing Address: City of Biggs, C/O: Biggs Hometown Celebration Committee , PO Box 307, Biggs, CA. 95917 ATTN: Al Byers

Phone (City) Message Number 530-868-5493

Booth Fees & Size \$40.00 FOR A 12’x 12’ Space, \$10.00 Power Fee optional, Power system is designed to provide 20 Amps per plug outlet, one per paid power fee unless otherwise contracted **Note: You are required to clean around your Booth Area before leaving the event.**

Types of Booths: Arts, Crafts, Handmade and Commercial Items. (Food Booths are intended for Non Profit Organizations). Informational and Children Activity booths are also allowed).

Limitation: Items **NOT Allowed** for sale: Cap Guns, Caps, Fire Arms, Knives, Weapons, Firecrackers, Laser Pointers, X-Rated Adult Materials, Stink Bombs, cap poppers, or anything else that is offensive or destructive. Only Legal items, **No:** Alcohol, Tobacco, or Drug Paraphernalia. **No Items** may be sold using the current year’s event theme. **NOTE:** You are limited to selling your wares to the space you have rented. A Change for Items listed below for sale may not be added to unless approved by the Committee Prior to the Event.

Facilities: You are renting space only, no tables, cover, etc is provided. Your booth and materials need to present a **Professional Look**. Power is available at a small cost, see Booth Fees.

DEADLINE APPLICATIONS: Please **Return** this completed form and cashiers check by **June 10th 2006**. Food booths will not be accepted past this date because of the information that is required by the County Health Department. If you have a **Food Booth Your Name and Information** will be submitted to the **Health Department** and you must meet the Health Department Conditions by Law

Confirmation : A Booth Confirmation, Assigned Location, Booth Layout Map and Agenda will be mailed to you after we receive your completed application form, proof of Vendor insurance as well as a cashiers check by June 10th 2006. **Include with your completed application a Self-Addressed, Stamped, Business Sized 9 1/2” X 4 1/8” Envelope with your Application.**

CHECK IN TIME 6AM to 8 AM

CHECK OUT TIME You are required to stay until 5:00 PM but may stay as long as 11:00 PM.

PAYMENT BY MONEY ORDER OR CASHIER CHECK ONLY! (NON REFUNDABLE)

Name; (Print) _____ **Non Profit ID Number or Resale#** _____

Organization (Print) _____ **POWER YES/NO** _____

Address _____ **POWER FEE** _____ **(\$10 Dollar Fee)**

City, State, Zip _____ **BOOTH FEE** **\$40.00**

Phone _____ **TOTAL PAID \$** _____

Fax _____ **Cell** _____ **NOTICE - NO REFUNDS ON ANY FEES**

E-Mail Address _____ **PAYABLE: American Hometown Celebration Committee**

Detail List of Items to be Sold _____

Release and Agreement to Indemnify (Note: List Additional Items on the back of this form as needed.)

I agree that neither the City of Biggs, or the Committee Members, Employees, shall be held liable for any damage or theft or any item displayed or for any personal injury that may occur at the July 4th Biggs American Hometown Celebration. I further understand that I assume all risk associated with the Event. I further agree that I shall defend and indemnify the City of Biggs, its Council members, employees and agents, from any action arising out of or in any way connected with my involvement with the July 4th Biggs American Hometown Celebration.

Signature: _____ **Date:** _____

(If Application is made for a group or organization, signature of authorized representative)